

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

BIOACTIVE COATINGS TO PREVENT TISSUE  
OVERGROWTH ON ARTIFICIAL HEART  
VALVES

Attorney Docket Number::

ECV-5589 DIV

Request for Early Publication::

No

Request for Non-Publication::

No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

No

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Michael  
Middle Name:: N.  
Family Name:: Helmus  
Name Suffix::  
City of Residence:: Long Beach  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 3733 Cedar Avenue  
City of Mailing Address:: Long Beach  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 90807

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Crystal  
Middle Name::  
Family Name:: Cunanan  
Name Suffix::  
City of Residence:: Mission Viejo  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 25581 Althea  
City of Mailing Address:: Mission Viejo

State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 92691

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Ralph  
Middle Name::  
Family Name:: Kafesjian  
Name Suffix::  
City of Residence:: Newport Beach  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 420 Westminster  
City of Mailing Address:: Newport Beach  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 92663

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Patrice  
Middle Name::  
Family Name:: Tremble  
Name Suffix::  
City of Residence:: Irvine  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 130 Giotto

City of Mailing Address:: Irvine  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 92614

### **Correspondence Information**

Correspondence Customer Number:: 30452

### **Representative Information**

Representative Customer Number:: 30452

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/571,987	05/16/00
09/571,987	An Appn claiming	60/178,084	01/25/00
	benefit under 35 USC		
	119(e) of		

### **Foreign Priority Information**

Country::	Application number::	Filing Date::
PCT	US01/02621	01/25/01

### **Assignee Information**

Assignee Name:: Edwards Lifesciences Corporation  
Street of mailing address:: One Edwards Way  
City of mailing address:: Irvine  
State or Province of mailing address:: CA  
Country of mailing address:: 92614  
Postal or Zip Code of mailing address:: 92614